

LONG TERM BENEFIT OF A TARGETED DIABETES **EDUCATION PROGRAM: THE KK CHINI EXPERIENCE.**

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INTRODUCTION

Knowledge empowers people, hence diabetes education is the basic yet an integral part in DM management. It may motivates patients as well as reinforces their adherence, self-care and therapeutic lifestyle modification.

OBJECTIVE

We aim to evaluate the one-year outcome of a diabetes educa-

RESULTS **Diabetic Complications** CVD Foot CKD Evo

tion program on a targeted group of diabetic patients at a primary health clinic in Pekan, Pahang.

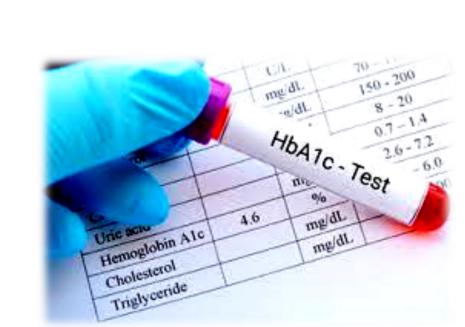
METHODOLOGY

This is a cohort survey recruiting poorly controlled diabetic patients into a locally designed education program at KK Chini. The four-hour program consists of empowering the small group of 5-6 patients with self-care practices given by doctor, diabetes educator, nutritionist, occupational therapist, and pharmacist. The cohort of 37 patients participated in 2017 and 2018 with complete record were included in this study. All relevant diabetes management information before and one year after the program were obtained. The difference between these two set of data were analysed using SPSS 24.0 version.



	Цус		
Pre 0%	Pre 20%	Pre 2.9%	Pre 0%
Post 0%	Post 20%	Post 2.9%	Post 2.9%
No new incidence	No new incidence	No new incidence	p= 0.10

Clinical parameters



Mean HbA1c Pre: 9.8 (2.4) Post: 8.6 (2.1) p= 0.003*



Mean FBS

Pre: 10.5 (4.6)

Post: 9.2 (3.0)

p= 0.066



Mean Creatinine Pre: 89.1 (18.5) Post: 91.1 (24.4) p= 0.484







Men : 68.6% Age > 60 year : 65.7% Malay : 100% FELDA settler : 100%





Hypertension Pre: 62.9% Post: 68.6%





Dyslipidemia

Pre 54.3% Post 54.3% No new incidence





Mean Body weight Pre: 67.5(12.7) Post: 67.6 (13.1) p= 0.774

23-25th September 2021

Total insulin dose (unit)/ day

Pre: 1.5 (6.1) - 4.6 (13.3) Post: 2.2 (9.3) - 6.7 (16.0) p= 0.138-0.589

CONCLUSION

A significant reduction in mean HbA1c of 1.2% was noted one year after the program. For the same duration of time, there were no significant difference in term of co-morbidities, diabetic complications, other clinical parameters and the total dose/day of diabetic medications (ODAs, insulin).

education program which is structured, multi-Diabetic disciplinary and targeted on poorly controlled patients is shown to be beneficial for glycaemic control in a one-year outcome study without the need for intensification of therapy.

p= 0.50

Post 45.7% No new incidence

Overweight

Pre 45.7%

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